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### FACSIMILE COVER SHEET

August 28, 2007

Receiver:

Central Fax Number/Examiner Lan Vinh

**USPTO** 

TEL #:

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571-273-8300

Sender:

Mary Terry, Patent Secretary for Anna Gavrilova

Our Ref. No.: NOVLP068

Your Ref:

10/690,084

Re:

Amendment E

Pages Including Cover Sheet(s): 16

#### **FAX CONTENTS:**

Fax Cover Sheet - 1 page Amendment Transmittal - 2 pages Amendment E – 10 pages Information Disclosure Statement: 2 pages Form 1449 - 1 page

#### **MESSAGE:**

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# AUG 2 8 2007

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Koos et al.

Attorney Docket No.: NOVLP068/NVLS-

2818

Application No.: 10/690,084

Examiner: Vinh, Lan

Filed: October 20, 2003

Group: 1765

Title: METHOD FOR FABRICATION OF SEMICONDUCTOR INTERCONNECT

STRUCTURE WITH REDUCED

CAPACITANCE, LEAKAGE CURRENT, AND

IMPROVED BREAKDOWN VOLTAGE

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to fax number 571-273-8300 of the U.S. Patent and Trademark Office on August 28, 2007.

Signed:

Mary Terry

#### AMENDMENT TRANSMITTAL

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	55	MINUS	76	0	x 25 =	x 50 = 0
Independent Claims	7	MINUS	7	.0	x 100 =	x 200 = 0
Multiple Depe	ndent Claim Pre	esent and Fe	e Not Previous	ly Paid		
				Total	\$	. \$0

	Applicant(s) hereby petition for a aforementioned Office Action,	month extension(s	s) of time to respond to the			
×	Applicant(s) believe that no (addition determined that such an extension is	required, Applicant(s)	hereby petition that such an extension			
	be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.					
	Enclosed is our Check No. in claim fee and/or extension of time for		to cover the additional			

 $\boxtimes$ 

Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. NOVLP068).

Respectfully submitted, RECEIVED
BEYER WEAVER & THOMESNER FAX CENTER

AUG 2 8 2007

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